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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

Application Number 10/736,422

Filing Date December 15, 2003

First Named Inventor Francois Aeby

Art Unit 3732

Examiner Name

Attorney Docket Number MAI-97-3

ENCLOSURES (Check all that apply)

- | | | |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
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| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
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| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | Return Receipt Post Card |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | Petition for Extension of Time under 37 CFR 1.136(a) |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name DENTSPLY International Inc.

Signature

Printed name James B. Bieber, Esquire

Date November 28, 2005

Reg. No. 28054

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name Teresa A. Euculano

Date November 28, 2005

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